



ASC Utilization Report
State Form 49933 (R3/6-05)
Indiana State Department of Health
Acute Care

Status: Finalized

I. Center Identification

Organization Name: SURGERY CENTER OF CARMEL

Street Address: 12188A N. Meridian St Ste 150

City: Carmel

County: Hamilton

Administrator Name: Maureen Chernoff

Administrator Email: mchernoff@scillc.md

ASC Web Address: Thesurgerycenterofcarmel.com

Fiscal Year: 2019

Accredited: Yes No

Name of Accrediting Body: AAAHC

Deemed Status: Yes No

Corporate Tax Status: For Profit Non Profit

II. Identification of Surgical Resources

Number of operating rooms	6
Number of procedure rooms	0

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	6746	11897
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
43239	1474	
19325	854	
45380	643	
69436	528	
58340	325	

19316	321
30520	291
30930	264
15820	224
28285	211

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	4
--	---